

County: Sheboygan
MORNINGSIDE HEALTH CENTER
3431 NORTH 13TH STREET
SHEBOYGAN 53083

Phone: (920) 457-5046
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/05): 72
Total Licensed Bed Capacity (12/31/05): 72
Number of Residents on 12/31/05: 71

Ownership:
Highest Level License:
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 68

Corporation
Skilled
No
Yes
Yes
68

Age, Gender, and Primary Diagnosis of Residents (12/31/05)				Length of Stay (12/31/05)	
Primary Diagnosis	%	Age Groups	%		%
Developmental Disabilities	0.0	Under 65	2.8	Less Than 1 Year	49.3
Mental Illness (Org./Psy)	8.5	65 - 74	1.4	1 - 4 Years	36.6
Mental Illness (Other)	0.0	75 - 84	22.5	More Than 4 Years	14.1
Alcohol & Other Drug Abuse	0.0	85 - 94	64.8		-----
Para-, Quadra-, Hemiplegic	0.0	95 & Over	8.5		100.0
Cancer	0.0		-----	Full-Time Equivalent	
Fractures	16.9		100.0	Nursing Staff per 100 Residents	
Cardiovascular	15.5	65 & Over	97.2	(12/31/05)	
Cerebrovascular	7.0		-----		
Diabetes	7.0	Gender	%	RNs	15.3
Respiratory	4.2		-----	LPNs	3.2
Other Medical Conditions	40.8	Male	19.7	Nursing Assistants,	
	-----	Female	80.3	Aides, & Orderlies	
	100.0		-----		36.7
			100.0		

Method of Reimbursement

Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care		Managed Care						
			Per Diem			Per Diem			Per Diem			Per Diem			Per Diem			Per Diem	Total Resi- dents	% Of All
Level of Care	No.	%	(\$)	No.	%	(\$)	No.	%	(\$)	No.	%	(\$)	No.	%	(\$)	No.	%	(\$)		
Int. Skilled Care	0	0.0	0	1	2.6	145	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	1	1.4
Skilled Care	12	100.0	316	37	97.4	124	0	0.0	0	20	100.0	176	0	0.0	0	1	100.0	150	70	98.6
Intermediate	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	12	100.0		38	100.0		0	0.0		20	100.0		0	0.0		1	100.0		71	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/05				

Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	16.0	Bathing	14.1	74.6	11.3	71
Private Home/With Home Health	0.0	Dressing	9.9	77.5	12.7	71
Other Nursing Homes	1.6	Transferring	21.1	59.2	19.7	71
Acute Care Hospitals	78.4	Toilet Use	25.4	62.0	12.7	71
Psych. Hosp.-MR/DD Facilities	0.0	Eating	66.2	25.4	8.5	71
Rehabilitation Hospitals	0.0	*****				
Other Locations	0.0					
Total Number of Admissions	125	Continence		%	Special Treatments	%
Percent Discharges To:		Indwelling Or External Catheter	5.6		Receiving Respiratory Care	5.6
Private Home/No Home Health	40.3	Occ/Freq. Incontinent of Bladder	64.8		Receiving Tracheostomy Care	1.4
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	35.2		Receiving Suctioning	0.0
Other Nursing Homes	10.5				Receiving Ostomy Care	4.2
Acute Care Hospitals	6.5	Mobility			Receiving Tube Feeding	0.0
Psych. Hosp.-MR/DD Facilities	0.0	Physically Restrained	0.0		Receiving Mechanically Altered Diets	39.4
Rehabilitation Hospitals	0.0					
Other Locations	4.0	Skin Care			Other Resident Characteristics	
Deaths	38.7	With Pressure Sores	7.0		Have Advance Directives	100.0
Total Number of Discharges		With Rashes	1.4		Medications	
(Including Deaths)	124				Receiving Psychoactive Drugs	67.6

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	94.4	85.8	1.10	86.3	1.09	88.8	1.06	88.1	1.07
Current Residents from In-County	90.1	81.3	1.11	80.0	1.13	83.2	1.08	77.6	1.16
Admissions from In-County, Still Residing	24.0	16.8	1.43	18.8	1.28	18.7	1.28	18.1	1.32
Admissions/Average Daily Census	183.8	216.2	0.85	180.5	1.02	177.7	1.03	162.3	1.13
Discharges/Average Daily Census	182.4	217.8	0.84	178.7	1.02	179.2	1.02	165.1	1.10
Discharges To Private Residence/Average Daily Census	73.5	100.9	0.73	87.1	0.84	83.4	0.88	74.8	0.98
Residents Receiving Skilled Care	100	97.2	1.03	96.4	1.04	96.3	1.04	92.1	1.09
Residents Aged 65 and Older	97.2	91.5	1.06	93.5	1.04	91.3	1.06	88.4	1.10
Title 19 (Medicaid) Funded Residents	53.5	61.7	0.87	59.0	0.91	61.8	0.87	65.3	0.82
Private Pay Funded Residents	28.2	19.4	1.45	24.5	1.15	22.5	1.25	20.2	1.40
Developmentally Disabled Residents	0.0	0.9	0.00	0.8	0.00	1.1	0.00	5.0	0.00
Mentally Ill Residents	8.5	28.9	0.29	31.6	0.27	34.8	0.24	32.9	0.26
General Medical Service Residents	40.8	23.7	1.72	26.1	1.57	23.0	1.77	22.8	1.79
Impaired ADL (Mean)	43.1	47.9	0.90	47.8	0.90	48.4	0.89	49.2	0.88
Psychological Problems	67.6	59.1	1.14	57.6	1.17	59.5	1.14	58.5	1.16
Nursing Care Required (Mean)	7.4	7.1	1.04	7.0	1.06	7.2	1.03	7.4	1.00